PAGE 1 / 9

Image# 13960944672

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIVI 3A	For Othe	r Than An Aut	horized Comm	ittee		Office Use Only	
NAME OF COMMITTEE (in fu	TYPE OR	PRINT ▼	Example: If to		12FE4M5		
Cardinal Health	Inc. PAC A/K/	A Cardinal H	ealth Compar	nies PAC			
ADDRESS (number and		irdinal Place					
Check if differe than previously reported. (ACC	/ Dublin				OH	43017	-
2. FEC IDENTIFICA	TION NUMBER ▼	, CIT	ГУ▲		STATE A	ZIP CO	DDE 🛦
C C00332833			S THIS REPORT X	NEW (N) OR	AN (A)	IENDED	
4. TYPE OF REPO (Choose One)	Rej Dud	port Port	20 (M2)	May 20 (M5)		20 (M8) 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Repo	rts:	Apr	20 (M4)	Jul 20 (M7)		20 (M10)	(Non-Election Year Only) Jan 31 (YE)
_	Report (Q1) (c)	12-Day	Primary (12P)	General	(12G)	Runoff (12R)
July 15 Quarterly I October 15	Report (Q2)	PRE-Election Report for the:	Convention	n (12C)	Special (12S)	
	Report (Q3)		M = M	/ D D /	Y Y Y	in the	
	Report (YE)	Election	on on			State	of
Report (No Year Only)	on-election (u)	30-Day POST-Election Report for the:	General (30G)	Runoff (3	60R)	Special (30S)
Termination (TER)	n Report	Election	on on	/ D = D /	Y = Y = Y = Y	in the State	of
5. Covering Period	01 0	1 2013	throug	h 01	31	2013	
I certify that I have exa	mined this Report a	and to the best of	my knowledge ar	nd belief it is tr	ue, correct and	d complete.	
Type or Print Name of	Treasurer Nancy C	Cushman					
Signature of Treasurer	Nancy Cushman		[Electronic	cally Filed] [Date 02	19	2013
NOTE: Submission of fal-	se, erroneous, or inc	complete informatio	n may subject the p	person signing t	his Report to the	ne penalties of 2	U.S.C. §437g.
Office Use Only						FEC FOF Rev. 12/2	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC

2013 01 2013 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 191856.82 January 1, 2013 (b) Cash on Hand at 191856.82 Beginning of Reporting Period..... 21989.56 21989.56 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 213846.38 213846.38 6(a) and 6(c) for Column B)..... 0.00 0.00 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 213846.38 213846.38 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC

Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	3564.00	
Than Political Committees	3564.00	
	3564.00	
(i) Itemized (use Schedule A)		3564.00
	3304.00	3304.00
(ii) Unitemized	18397.78	18397.78
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	21961.78	21961.78
Political Party Committees	0.00	0.00
	7	
	0.00	0.00
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	21961.78	21961.78
nsfers From Affiliated/Other		
ty Committees	0.00	0.00
oans Received	0.00	0.00
		7 7
n Repayments Received	0.00	0.00
ets To Operating Expenditures		
funds, Rebates, etc.)		
rry Totals to Line 37, page 5)	0.00	0.00
unds of Contributions Made	,	,
ederal Candidates and Other		
	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	27.78	27.78
	0.00	200
(IIOIII Scriedule H3)	0.00	0.00
Levin Funds (from Schedule H5)	0.00	0.00
20111 1 21120 (1.0111 201102210 1.10) 11111111		
Total Transfers (add 18(a) and 18(b))	0.00	0.00
t L right	Political Party Committees	(iii) TOTAL (add Lines 11(a)(i) and (ii)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tillo Totloa	Calendar Tear-to-Date
	(i) Federal Share	0.00	0.00
	.,		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
	Transfers to Affiliated/Other Party		
	Committees	0.00	0.00
	Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
	Independent Expenditures		
	(use Schedule E)	0.00	0.00
•	Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	
	(use Schedule F)	0.00	0.00
	Loan Repayments Made	0.00	0.00
	Lance Mark	0.00	0.00
	Loans Made Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	man i onical committees	5,00	
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
	Other Disbursements	0.00	0.00
	5		
	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(//		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0.00	0.00
	, , , , , , , , , , , , , , , , , , , ,	7 7	0.00
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	0.00	0.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	21961.78	21961.78
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21961.78	21961.78
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LI	NE NUMBER	R: PAG	iE 6	OF 9		
(check only one)						
X 118	11b	11c	12			
13	14	15	16	17		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Cardinal Health Inc. PAC A/K/A	A Cardinal Health Companies PAC	,		
Full Name (Last, First, Middle Initial) WILLIAM OWAD Mailing Address 7558 HEATHERWOOD LN	Date of Receipt			
City DUBLIN	State Zip Code OH 43017	Transaction ID : PR8739255508 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	200.60		
Name of Employer CARDINAL HEALTH, INC	Occupation SVP, OPERATIONAL EXC			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 200.60	P/R Deduction (\$100.30 Bi-Weekly)		
Full Name (Last, First, Middle Initial) MICHAEL C C KAUFMANN Mailing Address 7160 TEMPERANCE POINT	ST	Date of Receipt		
City	State Zip Code	01 31 2013 Transaction ID : PR8739385508 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	ů l			
Name of Employer CARDINAL HEALTH, INC	Occupation CEO, PHARMACEUTICAL			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)		
Full Name (Last, First, Middle Initial) . MICHAEL P P KENNEDY		Date of Receipt		
Mailing Address 4783 VISTA RIDGE DR	7-0-4	01 31 2013		
City DUBLIN	State Zip Code OH 43017	Transaction ID : PR8739505508 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	200.60		
Name of Employer CARDINAL HEALTH, INC	Occupation SVP, COMPLIANCE			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 200.60	P/R Deduction (\$100.30 Bi-Weekly)		
SUBTOTAL of Receipts This Page (optional)		785.80		
TOTAL This Period (last page this line number	r only)			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		7	OF	9	
	(check only one)									
	×	11a		11b		11c		12		
		13		14		15		16	,	17

NAME OF COMMITTEE (in Full)		the name and address of any political committee to					
Full Name (Last, First, Middle Initial) CAROLE S S WATKINS Mailing Address 1967 WOODLANDS PLACE City State Zip Code OH 43065 FEC ID number of contributing federal political committee. Name of Employer CARDINAL HEALTH, INC CIty State Zip Code OH 43065 FUI Name (Last, First, Middle Initial) MARK E ROSENBAUM Mailing Address 632 CHEOWA CIRCLE City State Zip Code TN 37919 Date of Receipt Transaction ID : PR8739395598 Amount of Each Receipt this Period Date of Receipt Transaction ID : PR8739395598 Amount of Each Receipt this Period Date of Receipt Transaction ID : PR8739395598 Amount of Each Receipt this Period Date of Receipt Transaction ID : PR8739395598 Amount of Each Receipt this Period Date of Receipt Transaction ID : PR8739395598 P/R Deduction (\$192.30 Bi-Weekly) Date of Receipt Transaction ID : PR873995598 P/R Deduction (\$192.30 Bi-Weekly) Date of Receipt this Period Date of Receipt Transaction ID : PR873995598 Amount of Each Receipt this Period P/R Deduction (\$192.30 Bi-Weekly) Date of Receipt Transaction ID : PR874915598 Amount of Each Receipt this Period Date of Receipt Transaction ID : PR874915598 Amount of Each Receipt this Period Date of Receipt Transaction ID : PR874915598 Amount of Each Receipt this Period Date of Receipt Transaction ID : PR874915598 Amount of Each Receipt this Period Date of Receipt Transaction ID : PR874915598 Amount of Each Receipt this Period Date of Receipt Transaction ID : PR874915598 Amount of Each Receipt this Period Date of Receipt Transaction ID : PR874915598 Amount of Each Receipt this Period Primary General Other (specify) P/R Deduction (\$135.00 Bi-Weekly) P/R Deduction (\$135.00 Bi-Weekly)	, ,	/A Cardinal Health Companies PAC					
L CAROLE S SWATKINS Mailing Address 1967 WOODLANDS PLACE City State Zip Code OH 43066 FEC ID number of contributing federal political committee. Name of Employer CARDINAL HEALTH, INC City State Zip Code OH 43066 Amount of Each Receipt this Period CHIEF HUMAN RESOURCE Full Name (Last, First, Middle Initial) MARK E ROSENBAUM Mailing Address 632 CHEOWA CIRCLE City State Zip Code TN 37919 Date of Receipt Date of Receipt P/R Deduction (\$192.30 Bi-Weekly) Date of Receipt Transaction ID: PR8739955508 Amount of Each Receipt this Period CHIEF CUSTOMER OFFIC Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code This State Zip	/		- T				
City		Date of Receipt					
City State Zip Code OH 43065	Mailing Address 1967 WOODLANDS PLAC	E					
POWELL OH 43065 FEC ID number of contributing federal political committee. Name of Employer CARDINAL HEALTH, INC Receipt For: OCCUPATION Full Name (Last, First, Middle Initial) MARK E ROSENBAUM Mailing Address 632 CHEOWA CIRCLE City Name of Employer CARDINAL HEALTH, INC CHIEF HUMAN RESOURCE Aggregate Year-to-Date ▼ Other (specify) ▼ State Transaction ID . PR8739955508 Amount of Each Receipt this Period P/R Deduction (\$192.30 Bi-Weekly) Date of Receipt Other (specify) ▼ Aggregate Year-to-Date ▼ OCCUPATION CHIEF CUSTOMER OFFIC Receipt For: OCARDINAL HEALTH, INC Receipt For: OTHIN Transaction ID . PR8739955508 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Other (specify) ▼ State CITY State CITY State CITY State CONNIE WOODBURN Mailing Address 9761 ERIN WOODS DR City DUBLIN OH 43017 CITY CARDINAL HEALTH, INC SVP. PROF & GOVT REL Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary Occupation CARDINAL HEALTH, INC SVP. PROF & GOVT REL Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary Occupation CARDINAL HEALTH, INC SVP. PROF & GOVT REL Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary Occupation CARDINAL HEALTH, INC SVP. PROF & GOVT REL Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ Primary Other (specify) ▼ P/R Deduction (\$135.00 Bi-Weekly)	City	State Zip Code					
Receipt For: Aggregate Year-to-Date ▼		·					
CARDINAL HEALTH, INC Receipt For: Primary General Other (specify) ▼ 384.60 CHIEF HUMAN RESOURCE Aggregate Year-to-Date ▼ P/R Deduction (\$192.30 Bi-Weekly) P/R Deduction (\$192.30 Bi-Weekly) Date of Receipt 1	•	C	384.60				
Receipt For: Primary General Other (specify) ▼ 384.60	Name of Employer	Occupation	-				
Primary General Other (specify) ▼ 384.60 Full Name (Last, First, Middle Initial) MARK E ROSENBAUM Mailing Address 632 CHEOWA CIRCLE City State Zip Code TN 37919 FEC ID number of contributing federal political committee. Name of Employer CARDINAL HEALTH, INC Receipt For: Primary General OH 43017 FEC ID number of contributing federal political committee. Full Name (Last, First, Middle Initial) CONNIE WOODBURN Mailing Address 9761 ERIN WOODS DR City State Zip Code OH 43017 FEC ID number of contributing federal political committee. City State Zip Code OH 43017 FEC ID number of contributing federal political committee. City State Zip Code OH 43017 FEC ID number of contributing federal political committee. City State Zip Code OH 43017 FEC ID number of contributing federal political committee. Carbinal Receipt For: Aggregate Year-to-Date ▼ Primary General Occupation CARDINAL HEALTH, INC Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Primary General Other (specify) ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) There (specify) The		CHIEF HUMAN RESOURCE	-				
Date of Receipt Mailing Address 632 CHEOWA CIRCLE City State Zip Code TN 37919 FEC ID number of contributing federal political committee. CIN Primary General Other (specify) ▼ State Zip Code TN 37919 Aggregate Year-to-Date ▼ P/R Deduction (\$192.30 Bi-Weekly) Date of Receipt Transaction ID : PR8739955508 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. P/R Deduction (\$192.30 Bi-Weekly) Date of Receipt Transaction ID : PR8739955508 Amount of Each Receipt this Period P/R Deduction (\$192.30 Bi-Weekly) Date of Receipt Transaction ID : PR8740155508 Amount of Each Receipt Transaction ID : PR8739955508 Amount of Each Receipt Transaction ID : PR873995508 Amount of Each Receipt Trans	Primary General	00 0	P/R Deduction (\$192.30 Bi-Weekly)				
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City KNOXVILLE FEC ID number of contributing federal political committee. Name of Employer CARDINAL HEALTH, INC Receipt For: Primary General Other (specify) ▼ State Zip Code TN 37919 Aggregate Year-to-Date ▼ P/R Deduction (\$192.30 Bi-Weekly) Date of Receipt Transaction ID: PR8739955508 Amount of Each Receipt this Period P/R Deduction (\$192.30 Bi-Weekly) Date of Receipt Date of Receipt Transaction ID: PR8739955508 Amount of Each Receipt this Period P/R Deduction (\$192.30 Bi-Weekly) Date of Receipt Date of Receipt Transaction ID: PR8739955508 Amount of Each Receipt this Period Transaction ID: PR8739955508 Amount of Each Receipt this Period Transaction ID: PR8739955508 Amount of Each Receipt this Period Transaction ID: PR873955508 Amount of Each Receipt this Period Transaction ID: PR873955508 Amount of Each Receipt this Period Transaction ID: PR873955508 Amount of Each Receipt this Period Transaction ID: PR873955508 Amount of Each Receipt this Period Transaction ID: PR873955508 Amount of Each Receipt this Period Transaction ID: PR873955508 Amount of Each Receipt this Period Transaction ID: PR873955508 Transaction ID: PR87395508 Transaction ID: PR87395508 Transaction ID: PR8739550	Mailing Address 632 CHEOWA CIRCLE						
RNOXVILLE TN 37919 Amount of Each Receipt this Period C 384.60 Receipt For: Primary General Other (specify) ▼ CONNIE WOODBURN Mailing Address 9761 ERIN WOODS DR City DUBLIN FEC ID number of contributing federal political committee. Name of Employer CARDINAL HEALTH, INC Receipt For: Primary General Other (specify) ▼ State Zip Code OH 43017 FEC ID number of contributing federal political committee. Name of Employer CARDINAL HEALTH, INC Receipt For: Aggregate Year-to-Date ▼ DUBLIN FEC ID number of contributing federal political committee. Name of Employer CARDINAL HEALTH, INC Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Amount of Each Receipt this Period P/R Deduction (\$135.00 Bi-Weekly) P/R Deduction (\$135.00 Bi-Weekly)	City	State Zip Code					
FEC ID number of contributing federal political committee. Name of Employer CARDINAL HEALTH, INC Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) CONNIE WOODBURN Mailing Address 9761 ERIN WOODS DR City State Zip Code OH 43017 FEC ID number of contributing federal political committee. Name of Employer CARDINAL HEALTH, INC Receipt For: Name of Employer CARDINAL HEALTH, INC Receipt For: Primary General Occupation SVP, PROF & GOVT REL Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$192.30 Bi-Weekly)		<u> </u>					
CARDINAL HEALTH, INC Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) CONNIE WOODBURN Mailing Address 9761 ERIN WOODS DR City DUBLIN FEC ID number of contributing federal political committee. Name of Employer CARDINAL HEALTH, INC Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$192.30 Bi-Weekly) Date of Receipt Transaction ID: PR8740155508 Amount of Each Receipt this Period P/R Deduction (\$135.00 Bi-Weekly)	•	C					
Receipt For: Primary General Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Date of Receipt CONNIE WOODBURN Date of Receipt City	. ,	,	1				
Primary General Other (specify) ▼ 384.60 P/R Deduction (\$192.30 Bi-Weekly) Full Name (Last, First, Middle Initial) CONNIE WOODBURN Mailing Address 9761 ERIN WOODS DR City State Zip Code OH 43017 FEC ID number of contributing federal political committee. Name of Employer Occupation SVP, PROF & GOVT REL Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$192.30 Bi-Weekly) P/R Deduction (\$192.30 Bi-Weekly) Date of Receipt Transaction ID: PR8740155508 Amount of Each Receipt this Period 270.00 P/R Deduction (\$135.00 Bi-Weekly)	·		-				
CONNIÈ WOODBURN Mailing Address 9761 ERIN WOODS DR City State Zip Code DUBLIN OH 43017 FEC ID number of contributing federal political committee. Name of Employer CARDINAL HEALTH, INC Receipt For: Primary General Other (specify) ▼ Date of Receipt Transaction ID : PR8740155508 Amount of Each Receipt this Period 270.00 P/R Deduction (\$135.00 Bi-Weekly)	Primary General	0.0	P/R Deduction (\$192.30 Bi-Weekly)				
Mailing Address 9761 ERIN WOODS DR City DUBLIN State OH 43017 City FEC ID number of contributing federal political committee. Name of Employer CARDINAL HEALTH, INC Receipt For: Primary Other (specify) ▼ P/R Deduction (\$135.00 Bi-Weekly)			Date of Receipt				
DUBLIN OH 43017 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer CARDINAL HEALTH, INC Receipt For: Primary General Other (specify) ▼ OH 43017 Amount of Each Receipt this Period 270.00 Amount of Each Receipt this Period Prival Syp., PROF & GOVT REL Aggregate Year-to-Date ▼ P/R Deduction (\$135.00 Bi-Weekly)	Mailing Address 9761 ERIN WOODS DR		M = M / D = D / Y = Y = Y				
FEC ID number of contributing federal political committee. Name of Employer CARDINAL HEALTH, INC Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$135.00 Bi-Weekly)							
CARDINAL HEALTH, INC Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$135.00 Bi-Weekly)	•	C					
CARDINAL HEALTH, INC Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$135.00 Bi-Weekly)	Name of Employer	Occupation	-				
Primary General Other (specify) ▼ P/R Deduction (\$135.00 Bi-Weekly)	CARDINAL HEALTH, INC						
Other (specify) 270.00		Aggregate Year-to-Date ▼	DID Destruit				
1020.20		270.00	P/K Deduction (\$135.00 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)		1039.20				
TOTAL This Period (last page this line number only)	TOTAL This Period (last page this line numb	er only)					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		8	OF	9
(check only one)									
X	11a		11b		11c		12		
	13		14		15		16	;	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Cardinal Health Inc. PAC A/K	/A Cardinal Health Companies PAC	<u> </u>
Full Name (Last, First, Middle Initial) A. GEORGE S S BARRETT		Date of Receipt
Mailing Address 246 E. SYCAMORE ST.		01 31 2013
City	State Zip Code	Transaction ID : PR8741535508
COLUMBUS	OH 43206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	384.60
Name of Employer	Occupation	
CARDINAL HEALTH, INC	CHAIRMAN/CEO, CARDIN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)
Full Name (Last, First, Middle Initial) 3. CRAIG MORFORD		Date of Receipt
Mailing Address 5565 LAKE SHORE AVE,		01 31 2013
City	State Zip Code	Transaction ID: PR8741595508
WESTERVILLE	OH 43082	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	384.60
Name of Employer	Occupation	1
CARDINAL HEALTH, INC	CHIEF COMPLIANCE/LEG	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)
Full Name (Last, First, Middle Initial) . MARK BLAKE		Date of Receipt
Mailing Address 129 NORWOOD AVE		01 31 2013
City MONTCLAIR	State Zip Code NJ 07043	Transaction ID : PR8742095508
FEC ID number of contributing	C	Amount of Each Receipt this Period 384.60
federal political committee.		
Name of Employer	Occupation	
CARDINAL HEALTH, INC	EVP, STRATEGY & CORP	
Receipt For: Primary General	Aggregate Year-to-Date ▼	P/P Doduction /\$102.20 Bi Manual
Other (specify) ▼	384.60	P/R Deduction (\$192.30 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)	•	1153.80
TOTAL This Period (last page this line numb	per only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	=	9	OF	9	
(c	(check only one)									
	X	11a		11b		11c		12		
		13		14		15		16	;	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Cardinal Health Inc. PAC A/K	'A Cardinal Health Companies PAC	;
Full Name (Last, First, Middle Initial) JEFFREY SCOTT Mailing Address 300 W. SPRING STREET #1502 City COLUMBUS FEC ID number of contributing federal political committee. Name of Employer CARDINAL HEALTH, INC Receipt For: Primary General Other (specify)	State Zip Code OH 43215 C Occupation SVP, GM P4 HEALTHCAR Aggregate Year-to-Date ▼ 200.60	Date of Receipt O1 31 2013 Transaction ID: PR8742195508 Amount of Each Receipt this Period 200.60 P/R Deduction (\$100.30 Bi-Weekly)
Full Name (Last, First, Middle Initial) 3. DONALD M CASEY Mailing Address 7708 TILLINGHAST DRIVE		Date of Receipt 01 31 2013
City	State Zip Code	Transaction ID : PR9413435508
DUBLIN	OH 43017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	384.60
Name of Employer CARDINAL HEALTH, INC	Occupation CEO, MEDICAL SEGMENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60	P/R Deduction (\$192.30 Bi-Weekly)
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	7 anount of Each Heceipt this Period
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional).		585.20
	<u> </u>	3564.00
TOTAL This Period (last page this line number	er only) >	0001100